



PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (Optional) 19603/3306 (CRF D-2136B)
<b>CERTIFICATE OF MAILING</b> I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to Mail Stop _____, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on April 7, 2004.		
In re Application of Collmer et al.		
Application Number 09/597,513		Filed June 20, 2000
For HYPERSENSITIVE RESPONSE ELICITOR FROM <i>PSEUDOMONAS SYRINGAE</i> AND ITS USE		
Group Art Unit 1638		Examiner A. Kubelik
Signature: <u>Wendy L. Barry</u> Name: <u>Wendy L. Barry</u>		
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.		
The requested extension and appropriate entity fee are as follows (check time period desired):		
<input type="checkbox"/> One month (37 CFR 1.17(a)(1)) - (\$55/\$110)		\$ _____
<input type="checkbox"/> Two months (37 CFR 1.17(a)(2)) - (\$210/\$420)		\$ _____
<input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3)) - (\$475/\$950)		\$ <u>475.00</u>
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) - (\$740/\$1480)		\$ _____
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) - (\$1005/\$2010)		\$ _____
<input checked="" type="checkbox"/> Applicant claims small entity status.		
<input checked="" type="checkbox"/> A check to cover the fee is enclosed.		
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.		
<input type="checkbox"/> The Commissioner has already been authorized to charge fees in this application to a Deposit Account.		
<input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment, to Deposit Account Number <u>14-1138</u> . I have enclosed a duplicate copy of this sheet.		
I am the <input type="checkbox"/> applicant/inventor		
<input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).		
<input checked="" type="checkbox"/> attorney or agent of record.		
<input type="checkbox"/> attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a) _____		
<b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b>		
<u>April 7, 2004</u> Date		<u>Edwin V. Merkel</u> Signature <u>Edwin V. Merkel</u> Typed or printed name
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.		
<input checked="" type="checkbox"/> Total of 1 form is submitted.		

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